

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ActBlue

Full Name (Last, First, Middle Initial)

A. ROBERT CARTER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Mailing Address 62 BROADMOOR TRL

City	State	Zip Code
FAIRPORT	NY	14450

Transaction ID : SB28A_23269657Purpose of Disbursement
Contribution Refund

Amount of Each Disbursement this Period

Candidate Name

Category/ Type
25.00

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Refund of contribution, initially earmarked for
DEMOCRATIC CONGRESSIONAL CAMPAIGN
COMMITTEE (C000009)

Full Name (Last, First, Middle Initial)

B. RENEE CASSIDY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		24		2014

Mailing Address 113 E CAMPO BELLO DR

City	State	Zip Code
PHOENIX	AZ	85022

Transaction ID : SB28A_24127132Purpose of Disbursement
Contribution Refund

Amount of Each Disbursement this Period

Candidate Name

Category/ Type
5.00

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Refund of contribution, initially earmarked for
DEMOCRATIC CONGRESSIONAL CAMPAIGN
COMMITTEE (C000009)

Full Name (Last, First, Middle Initial)

C. THALIA CASSUTO

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Mailing Address 940 DUGWAY ROAD

City	State	Zip Code
CHATHAM	NY	12037

Transaction ID : SB28A_19391422Purpose of Disbursement
Contribution Refund

Amount of Each Disbursement this Period

Candidate Name

Category/ Type
50.00

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Refund of contribution, initially earmarked for
DEMOCRATIC SENATORIAL CAMPAIGN
COMMITTEE (C00042366)**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

80.00

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